

**MPH Modified Fast Track Program  
Approval Form for Undergraduate 400 Level Courses  
(Effective Spring 2012)**

Student: \_\_\_\_\_ WCU Graduation Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Planned Date to Submit MPH Degree Application: \_\_\_\_\_

Planned Semester for MPH Program Start: \_\_\_\_\_ Semester \_\_\_\_\_ Year

If presently in the MPH Program Provide Date of Admission: \_\_\_\_\_

**Courses Waived for MPH Requirements – Completed During Senior Year of the Undergraduate Program**

**2 (400) Level Health Undergraduate Courses**

Course Title/Number: \_\_\_\_\_ Grade: \_\_\_\_ Semester/Year Completed: \_\_\_\_\_

Course Title/Number: \_\_\_\_\_ Grade: \_\_\_\_ Semester/Year Completed: \_\_\_\_\_

**Time Extension to Complete the Degree and Time Requirements for Waived Courses:** Students have the option of extending the time needed to complete the degree. If courses cannot be completed within the recommended course rotations listed on the advising sheet, students will need to meet with their advisors to work on alternative course schedules. Students who need a time extension should be aware of the time requirements for waived courses. For the (2) 400 level health courses to be waived as requirements for the MPH degree, all students will need to finish the MPH Degree within six years of completion of the (2) 400 level health courses. If the time to complete the MPH Degree Program extends beyond the six years, this will result in forfeiture of waived courses for the MPH Degree. Students in this situation will have the option to complete the degree (with approved extension for degree completion) but will need to replace the (2) 400 level courses with graduate elective courses selected under advisement. The 400 level courses are waived during graduation clearance for the MPH degree.

**STUDENT ACKNOWLEDGEMENT OF TIME REQUIREMENTS FOR WAIVED COURSES: I fully understand the time requirement policy for waived courses (completed during undergraduate senior year) for the MPH Degree.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Approval Signatures For 400 Level Courses**

Student: \_\_\_\_\_ Date: \_\_\_\_\_

MPH Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

MPH Program Director: \_\_\_\_\_ Date: \_\_\_\_\_

The MPH Advisor and the student keep copies of this form as a record of approval for the 400 level course waiver and student understanding of time requirements for MPH degree completion along with implications for waived course completed during undergraduate senior year.